

OT12 Rec'd PCT/PTO 18 JAN 2005

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

Docket No.
13999-1US

In Re: Application Of: **PETROFSKY, Jerrold S.**

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/506,911	September 2, 2004	To be assigned	23676	To be assigned	To be assigned

Title: **METHOD AND DEVICE FOR WOUND HEALING**

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

37 CFR 1.97(b)

1. ☒ The Information Disclosure Statement submitted herewith is being filed ~~within three months of the filing~~ of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.

37 CFR 1.97(c)

2. ☐ The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:
- ☐ the statement specified in 37 CFR 1.97(e);
- OR**
- ☐ the fee set forth in 37 CFR 1.17(p).

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
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Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of _____ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. **19-2090** as described below.
- ☐ Charge the amount of _____
- ☐ Credit any overpayment.
- ☒ Charge any additional fee required.
- ☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. _____)

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Signature

Typed or Printed Name of Person Signing Certificate

Certificate of Mailing by First Class Mail

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January 12, 2005

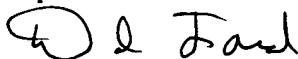
(Date)

Signature of Person Mailing Correspondence

Marilyn Paik

Typed or Printed Name of Person Mailing Certificate

***This certificate may only be used if paying by deposit account.**



Signature

Dated: **January 12, 2005**

David A. Farah, M.D.

Reg. No. 38,134

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Fax: (626) 795-6321

CC: Loma Linda University

10/506,911

13999-1US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:) Group Art Unit: To be assigned
)
PETROFSKY, Jerrold S.) Examiner: To be assigned
)
Serial No.: 10/506,911)
) Confirmation No.
Filed: September 2, 2004)
)
For: Method and Device for Wound)
Healing) Pasadena, California
)

SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment
 COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

In fulfilling the duty of candor and good faith, the document listed on the attached PTO-1449 (two copies) is disclosed to the Office in accordance with 37 CFR § 1.56. It should be noted the word "prior" has been deleted from the attached PTO-1449. It is not admitted that the information in the listed document is material to patentability as defined in 37 CFR § 1.56(b) or that the document is analogous art. The Examiner is asked to consider this document, and to confirm such consideration by returning an initialed and signed copy of the PTO-1449 form.

Applicant believes that because this Disclosure Statement is being submitted within three months of the filing date and/or before the first Office Action on the merits, no fee is due. If this is incorrect, please charge any necessary fee for consideration of this Disclosure Statement to Deposit Account No. 19-2090.

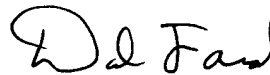
It is believed that this Disclosure complies with the requirements of 37 CFR 1.56 and the MPEP. If the some reason the Examiner thinks otherwise, he is asked to call the undersigned so that any deficiencies can be remedied.

Respectfully submitted,

SHELDON & MAK PC

Date: January 12, 2005

By



David A. Farah, M.D.
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Direct all Communications to:

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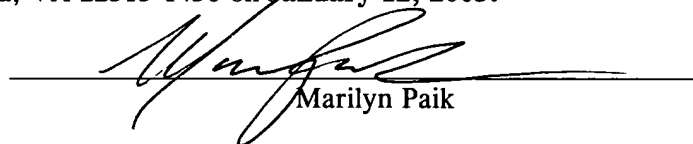
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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States postal service as First Class Mail in an envelope addressed to: Mail Stop Amendment, COMMISSIONER FOR PATENTS, P.O. Box 1450, Alexandria, VA 22313-1450 on **January 12, 2005**.

Date: January 12, 2005



Marilyn Paik

INFORMATION DISCLOSURE CITATION <i>(Use several sheets if necessary)</i>				Docket Number (Optional) 13999-1U		Application Number 10/506,,911	
				Applicant(s) PETROFSKY, Jerrold S.			
				Filing Date September 2, 2004		Group Art Unit To be assigned	

U.S. PATENT DOCUMENTS							
*EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	A1						
	A2						
	A3						
	A4						
	A5						

U.S. PATENT APPLICATION PUBLICATIONS							
*EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	B1						
	B2						
	B3						
	B4						

FOREIGN PATENT DOCUMENTS								
	REF	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	Translation	
							YES	NO
	C1							
	C2							
	C3							
	C4							
	C5							

OTHER DOCUMENTS		<i>(Including Author, Title, Date, Pertinent Pages, Etc.)</i>
	D1	Mertz PM, Davis S, Arakawa Y, Cohen A, "Pulsed rg EGF treatment increased epithelialation of partial thickness wounds," J. Invest. Derm., 1988; 90:558.
	D2	

EXAMINER	DATE CONSIDERED
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EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP Section 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.